SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT BY A CANDIDATE'S COMMITTEE (\$1,000 CONTRIBUTIONS OR MORE) State Form 48492 (R / 11-99)

Indiana Election Commission (IC 3-9-5-20) Approved by State Board of Accounts 1999

INSTRUCTIONS: Only candidates receiving a "large contribution" are required to file this report. Please type or print legibly IN BLACK INK all information on this form.

(CFA-11)

See A		FILE	NUMBI	ER	
TOTAL	PAG	es in e	NTIRE	CFA-1	1 REPORT

For assistance in completing this form, see instructions on the reverse	side.				
COMIN	NITTEE INFORMATION				
1. Full name of candidate (Include any nickname)	(3/7)7	2. Committee telephone number (3/7)773-8888			
3. Mailing address (address where all campaign finance correspondence is rece 9247 NoRTH MERIDIAN SA. STE	ived) Check if this is a new address ZOO				
4. City, state, ZIP code LND/ANA POLIS, IN 46260	5. Party affiliation or if in	5. Party affiliation or if independent KEPUBLICAN			
6. Office sought (Include district number, if any, Not required for exploratory of Con M 15510NER DISTRICT Z	ommittee.) 7. County of residence	7. County of residence HAMILTON			
8. Reporting period: From: '4/8/00 Through: 4/19/0	00				
For classification, enter INDV for individual; PAC for politi NONE for all entries which are not one of the above cate	cal action committee; CORP for egories.	corporation; LAB for I	abor organization;		
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED		
PAC 1. HOME PAC	Contributions: Direct In-Kind (describe)	U 08	4/19/00		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED RECEIVED BY
Classification 1. HOME PAC PAC PARAMETER 1. HOME PAC	Contributions: Direct In-Kind (describe)	¥ 3,000°	4/19/00 TRES
INDIANA POLIS, IN 6244 Contributor's Occupation (# applicable) RUIL DERS	Other Receipts:	3,00	
Classification 2.	Contributions:		
Contributor's Occupation (if acolicable)	Other Receipts:		
Classification 3.			-
	Contributions: Direct In-Kind (describe)		
Contributor's Occupation (if applicable)	Other Receipts:		
CERTIFICATION	50 mm 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature on File

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class 3 Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18).

FOR DESIGNATION OF THE PROPERTY OF THE PROPERT